

YES! I want to register for a

Business Community Workshop

1. Complete the requested information.
2. Mail or Fax back the completed form.

Which workshop do you want to attend?

Class Date _____

Class Location _____

Please tell us about yourself and your business:

Attendee's Name _____

Business Name _____

Street _____

City _____ State _____ Zip _____

Phone _____ Fax _____ E-mail _____

Are you an owner (or employee) of an active business? ☐ Yes ☐ No

What type of business is it: ☐ Service ☐ Construction ☐ Wholesale/Resale ☐ Manufacturing
(choose one or more)

Is your business certified as a "small business" with the State of California? ☐ Yes ☐ No

Is your business certified as a "DVBE" with the State of California? ☐ Yes ☐ No

How much experience have you had contracting with the State of California? ☐ None ☐ A little ☐ A lot

Is there any subject in state contracting that you are particularly interested in or want to know more about? _____

How did you hear about the class?

- ☐ I received a brochure in the mail.
- ☐ I saw it advertised on the Internet.
- ☐ I learned about it at my local "SBDC" (Small Business Development Center)
- ☐ A friend told me
- ☐ Other

Mail the completed registration form to:

Office of Small Business Certification and Resources
1531 I Street, 2nd Floor
Sacramento, CA 95814

Or Fax to:

(916) 442-7855

Upon receipt of your registration form, you'll receive an acknowledgment. Prior to the class, you'll receive a confirmation letter with pertinent information.